

(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number: **0000042402** Submit Date: **2018-02-16** FRN: **0009959255**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/16/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0009959255	Word Radio Educational Foundation

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
PO Box 398	New Durham	NH	03855- 0398	+1 (603) 859-9170	WORDRADIOFM@GMAIL.

2. Contact Representative

Name	Organization
Matthew H. McCormick	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812- 0438	mccormick@fhhlaw.

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Licensee			
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No		

(b) Provide the following information about this report:				
Purpose	Biennial			
"As of" date	10/01/2017			
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.			

and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
Word Radio Educational Foundation	0009959255

Fac. ID No.	Call Sign	City	State	Service
43801	WWPC	NEW DURHAM	NH	FM
73718	WSEW	SANFORD	ME	FM
171239	WMEK	KENNEBUNKPORT	ME	FM
171251	WMTP	CONWAY	NH	FM
172500	WRKJ	WESTBROOK	ME	FM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Not Applicable.

2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information				
FRN	0009959255			
Entity Name	Word Radio Educational Foundation			
Address	РО Вох	398		
	Street 1			
	Street 2			
	City	New Durham		
	State ("NA" if non-U.S. address)	NH		
	Zip/Postal Code	03855-0398		

	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
Positional Interests (check all that apply)	Respondent				
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity				
Interest Percentages	Voting	0.0%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
	Total assets (Equity Debt Plus)	0.0%			
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No			

Ownership Information				
FRN	9990124362			
Name	Fraser Browning			
Address	РО Вох			
	Street 1	682 PORTLAND STREET		
	Street 2			
	City	ROCHESTER		
	State ("NA" if non-U.S. address)	NH		
	Zip/Postal Code	03867		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retired			
By Whom Appointed or Elected	Board of Directors			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

Does interest holder have an attributable interest in one or more broadcast stations	
that do not appear on this report?	

No

Ownership Information			
FRN	9990124365		
Name	Mike Govey		
Address	РО Вох		
	Street 1	220A NORTH MAIN STREET	
	Street 2		
	City	ROCHESTER	
	State ("NA" if non-U.S. address)	NH	
	Zip/Postal Code	03867	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Christian Minister		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one oreport?	or more broadcast stations No	

Ownership Information		
FRN	9990124367	
Name	Erin Donahue	
Address	РО Вох	
	Street 1	454 BLUE RIDGE DRIVE
	Street 2	
	City	TROY

	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	22974	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	TELECOMMUNICATIONS MANAGEMENT		
By Whom Appointed or Elected	BOARD OF DIRECTORS		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information		
FRN	9990124368	
Name	Ronald R. Malone	
Address	РО Вох	
	Street 1	2 RIDGE ROAD
	Street 2	
	City NEW DURHAM	
	State ("NA" if non-U.S. address)	NH
	Zip/Postal Code	03855
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired Telecom Engineer	
By Whom Appointed or Elected	Board of Directors	

Citizenship, Gender, Ethnicity, and Race	Citizenship	US
Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No

Ownership Information			
FRN	9990124369		
Name	John Heimann		
Address	PO Box		
	Street 1	180 DRY HILL ROAD	
	Street 2		
	City	ROCHESTER	
	State ("NA" if non-U.S. address)	NH	
	Zip/Postal Code	03867	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Computer Programmer, Engineer		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations	No

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	

3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

Licensee has no parent or subsidiary entities.

Section III - Certification

Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: President Exact Legal Title or Name of Respondent: Word Radio Educational Foundation Name: Ronald R. Malone Phone: 6037658386 02/16/2018